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## "FEE ADDRESS" INDICATION FORM

Address to: Mail Stop M Correspondence Commissioner for Patents - OR - P.O. Box 1450 Alexandria, VA 22313-1450	Fax to: 571-273-6500
INSTRUCTIONS: The issue fee must have been paid for application(s) listed on this form. In addition, only an address represented by a Customer Number can be established as the fee address for maintenance fee purposes (hereafter, fee address). A fee address should be established when correspondence related to maintenance fees should be mailed to a different address than the correspondence address for the application. When to check the first box below: If you have a Customer Number represent the fee address. When to check the second box below: If you have no Customer Number representing the desired fee address, in which case a completed Request for Customer Number (PTO/SB/125) must be attached to this form. For more information on Customer Numbers, see the Manual of Patent Examining Procedure (MPEP) § 403.	
For the following listed application(s), please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with:	
Customer Number: 56090	
OR	
The attached Request for Customer Number (PTO/SB/125) form.	
PATENT NUMBER (if known)	APPLICATION NUMBER
	10/692,495
Completed by (check one):	
Applicant/Inventor	Signature Signature
Attorney or Agent of record 63,901 Simona Freeman  (Reg. No.) Typed or printed name	
Assignce of record of the entire interest. See 37 CFR 3.71. (408) 720-8300  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  (Form PTO/SB/96)	
Assignee recorded at ReelFrame	July 16, 2009
NOTE: Signatures of all the inventors or assigneds of record of the entire interest or their representative(s) are required. Submit multiple forms if more that one appraison or required, see below.	
* Total of 🗠 forms are submitted.	

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